COMMUNITY BENEFITS REPORTING FORM

Pursuant to RSA 7:32-c-l

FOR FISCAL YEAR BEGINNING 01/01/2015

RECEIVED

to be filed with:
Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

APR 9 - 2015

^HARITABLE TRUSTS UNIT

Section 1: ORGANIZATIONAL INFORMATION

Organization Name Metro Health Foundation of NH, Inc.
d/b/a Golden View Health Care Center and The Inn at Golden View

Street Address 19 NH Route 104

City Meredith

County 01 - Belknap

State NH Zip Code 3253

Federal ID # 02-0502466

State Registration # 15242

Website Address: www.goldenview.org

Is the organization's community benefit plan on the organization's website? Yes

Has the organization filed its Community Benefits Plan Initial Filing Information form? Yes

IF NO, please complete and attach the Initial Filing Information Form.

IF YES, has any of the initial filing information changed since the date of submission? No IF YES, please attach the updated information.

Chief Executive:

Jeanne Sanders, CEO

6032798111

jeanne@goldenview.org

Board Chair:

Dr. Craig Markert, MD

6032798111

information@goldenview.org

Community Benefits

Plan Contact:

Jeanne Sanders

6032798111

jeanne@goldenview.org

Is this report being filed on behalf of more than one health care charitable trust? No

IF YES, please complete a copy of this page for each individual organization included in this filing.

Section 2: MISSION & COMMUNITY SERVED

Mission Statement: Our mission is to be the preferred choice in community living for health care and hospitality services benefiting our community-at-large through access to our educational/healthcare resources and expertise.

Has the Mission Statement been reaffirmed in the past year (RSA 7:32e-I)? Yes

Please describe the community served by the health care charitable trust. "Community" may be defined as a geographic service area and/or a population segment.

Service Area (Identify Towns or Region describing the trust's primary service area):

Geographically our catchment area includes the towns of Meredith, Cernter Harbor, Moultonborough, Sandwich, New Hampton, Bristol, Hebron, Laconia, Holderness, Ashland, Plymouth, Campton and Thornton. Residents from these towns are given priority access; however this geographical area is not an inclusivae demographic characteristic of the population served by the Golden View Health Care Center. More specifcally, individuals from other communities also seek the distinctive and quality services available, particularly those with local family members that are able to provide additional emotional and social support.

Service Population (Describe demographic or other characteristics if the trust primarily serves a population other than the general population):

The majority of individuals receiving health care and support services at our Golden View Community are seniors, older adults and their families in need of skilled nursing services, short term post-hospital rehabilitation, memory support services, short stay care, traditional long term living care, supported residential care and other professional support services. However, Golden View has seen an increase in the number of individuals age 50-65 accessing short-term post hospital rehabilitation through managed care health insurance plans.

Moreover, Golden View serves the community at large through its facilitation of carious community based educational and clinical programs and the professional support servics available to the family, friends and caregivers of individuals residing in the community, but depend on assistance and/or health care services. Furthermore, for over 40 years Golden View Health Care Center has been facilitating community connections and building relationships with other local community based organizations. Golden View currently collaborates with over 110 local organizations ranging from spiitual and religious, arts and entertainment, children and educational, health, wellness and support, and social and general community organizations. Lastly, or continuing effort to cultivate relationships with government and leades at the local and state leve has enabled our leadership staff to advocate for quality health care initiatives on behlaf of current and future residents, and in turn for the well-being of the community-at-large.

Section 3: COMMUNITY NEEDS ASSESSMENT

In what year was the last community needs assessment conducted to assist in determining the activities to be included in the community benefit plan?

2012 (Please attach a copy of the needs assessment if completed in the past year)

Was the assessment conducted in conjunction with other health care charitable trusts in your community? No

Based on the needs assessment and community engagement process, what are the priority needs and health concerns of your community?

,	NEED (Please enter code # from attached list of community needs)
1	124
2	125
3	421
4	601
5	372
6	611
7	509
8	602
9	101

What other important health care needs or community characteristics were considered in the development of the current community benefits plan (e.g. essential needs or services not specifically identified in the community needs assessment)?

	NEED (Please enter code # from
	attached list of community needs)
Α	126
В	522
ı C	501
D	507
Е	300
F	600
G	999

Please provide additional description or comments on community needs including description of "other" needs (code 999) if applicable. *Attach additional pages if necessary*:

Through the needs assessment and community engagement process, Golden View Health Care Center has outlined the priority needs and health concerns determined by our fellow community members. In addition, our local Board of Directors and leadership staff have itentified seven (7) essential needs and services, listed above, deserving attention and resource allocation. In the recent fiscal year, Golden View has purposefully allocated resources and provided new services in the areas of: Community Health Education via free monthly seminars on a variety of health

related topics and monthly Alzheimer's Support Group meetings; Educational Attainment via free and subsidized educational seminars designed for health care professionals; Local Emergency Response via in-house practice drills, collaboration with local and regional emergency response teams; Availability of Physical/Occupational Therapy and Other via an expanded short term post-hospital rehabilitation program. In 2014, Golden View reponded to community needs by renovating part of the traditional nursing home facility and added 26 brand new private assisted living suites featuring enhanced amenities and services for our more independent residents. The renovated floor has two kitchens and sitting areas to provide for that home-like feeling and atmosphere. Our supportive team of professional staff and provide quality health care for our elder generation.

Section 4: COMMUNITY BENEFIT ACTIVITIES

Identify the categories of Community Benefit activities provided in the preceding year and planned for the upcoming year (note: some categories may be blank). For each area where your organization has activities, report the past and/or projected unreimbursed costs for *all* community benefit activities in that category. For each category, also indicate the *primary* community needs that are addressed by these activities by referring to the applicable number or letter from the lists on the previous page (i.e. the listed needs may relate to only a subset of the total reported costs in some categories).

A. Community Health Services	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Community Health Education	E F 5	\$6,587.00	8,000.00
Community-based Clinical Services	Е 8	\$0.00	\$0.00
Health Care Support Services	8 F 9	\$6,335.00	\$9,000.00
Other:			

B. Health Professions Education	lucation Community Need Addressed		Need (preceding year)			Unreimbursed Costs (projected)	
Provision of Clinical Settings for Undergraduate Training	D C	2	\$3,500.00	4,500.00			
Intern/Residency Education	D C	2	\$0.00	\$0.00			
Scholarships/Funding for Health Professions Ed.	D 5	С	\$2,500.00	\$3,500.00			
Other:	D E	8	\$7,500.00	\$7,600.00			

C. Subsidized Health Services	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Type of Service: N/A			
Type of Service:			

D. Research	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Clinical Research		\$0.00	\$0.00
Community Health Research		\$0.00	\$0.00
Other:		\$0.00	\$0.00

E. Financial Contributions	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Cash Donations	C 5 Other	\$4,290.00	\$6,000.00
Grants		\$0.00	\$0.00
In-Kind Assistance		\$9,000.00	\$9,000.00
Resource Development Assistance	2 G Other	\$0.00	\$0.00

F. Community Building Activities	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)	
Physical Infrastructure Improvement	F	\$0.00	\$0.00	
Economic Development	D F Other	\$1,500.00	\$1,500.00	
Support Systems Enhancement	B 4 7	\$5,000.00	\$5,000.00	
Environmental Improvements		\$0.00	\$0.00	
Leadership Development; Training for Community Members	D F C	\$4,500.00	\$4,500.00	
Coalition Building	F 5 C	\$7,572.00	\$10,000.00	
Community Health Advocacy	9 E F	\$65,000.00	\$65,000.00	

G. Community Benefit Operations	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Dedicated Staff Costs	2 E 5	\$65,000.00	\$35,000.00
Community Needs/Asset Assessment		\$0.00	\$0.00
Other Operations		\$500.00	\$1,000.00

H. Charity Care	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)
Free & Discounted Health Care Services		\$0.00	\$0.00

I. Government-Sponsored Health Care	Community Need Addressed	Unreimbursed Costs (preceding year)	Unreimbursed Costs (projected)	
Medicare Costs exceeding reimbursement	G 9	\$0.00	\$0.00	
Medicaid Costs exceeding reimbursement	G 9	\$1,919,930.00	\$2,800,000.00	
Other Publicly-funded health care costs exceeding reimbursement	<u> </u>	\$0.00	\$0.00	

Section 5: SUMMARY FINANCIAL MEASURES

Financial Information for Most Recent Fiscal Year	Dollar Amount	
Gross Receipts from Operations	\$11,758,085.00	
Net Revenue from Patient Services	\$11,630,046.00	
Total Operating Expenses	\$11,670,865.00	
Net Medicare Revenue	\$4,989,842.00	
Medicare Costs	\$3,123,675.00	
Net Medicaid Revenue	\$3,286,195.00	
Medicaid Costs	\$5,206,125.00	
Unreimbursed Charity Care Expenses		
Unreimbursed Expenses of Other Community Benefits		
Total Unreimbursed Community Benefit Expenses		
Leveraged Revenue for Community Benefit Activities		
Total Community Benefits including Leveraged Revenue for Community Benefit Activities		

Section 6: COMMUNITY ENGAGEMENT in the Community Benefits Process

List the Community Organizations, Local Government Officials and other Representatives of the Public consulted in the community benefits planning process. Indicate the role of each in the process.	Identification of Need	Prioritization of Need	Development of the Plan	Commented on Proposed Plan
1) Selectmen: Meredith, Center HArbor, New Hampton,	\square	\boxtimes		
Sandwich, Ashland, Bristol, Holderness, Moultonborough				
2) School Board Members: Inter-Lakes School District		\boxtimes		
3) Director of Inter-Lakes and Plymouth Regional Senior Center		\boxtimes		
 Parks & Recreation Directors: Meredith, Center Harbor, Moultonborough 				
5) Community Action Nutrition & Elder Services Program Manager				
6) Members of Inter-Lakes Senior Center				
7) Clergy of Churches in Meredith, Center Harbor, Moultonborough, New Hampton				
8) Rotary Club		\boxtimes		
9) Kiwanis				
10) Lions Club				
11) Altrusa				
12) Visiting Nurse Association: Meredith, Moultonborough, Central NH VNA & Hospice, Pemi Baker Community Health & Hospice, Newfound Area Nursing Association				
13) Community Caregivers Group		\boxtimes		
14) Chamber of Commerce: Meredith/Center Harbor, LAconia/Weirs, Bristol, Ashland, Greater Plymouth				
15) Historical Societies		\boxtimes		
16) Local Banks		\boxtimes		
17) Current residents of GVHCC, their family and friends	\square	\boxtimes		
18) Hospital Care Managers		\boxtimes		
19) Greater Meredith Business Leaders		\boxtimes		
20) Local Spiritual Leaders		\boxtimes		
21) GVHCC attending physicialns, consulting specialists, other health care professionals		\boxtimes		
22) Members of GVHCC Board of Directors		\boxtimes	\boxtimes	\boxtimes
23)				
24)				
25)				

Please provide a description of the methods used to solicit community input on community needs (attach additional pages if necessary): Our most current community needs assessment was conducted in 2012. For this assessment community input was solicied in three (3) ways: (1) A formal review was conducted to identify the community needs currently being served by Golden View Health Care Center; (2) data analysis derived from a series of oral interviews with selected community representatives; (3) data analysis derived from survey questionaire reponses provided

by local government officials, key leaders, community-based organizations, service providers, resident family members and other stakeholders. This survey was available in paper and internet based formats and was distributed widely, including being available on our website.

Golden View Health Care Center understands that the demographics and needs that loosely define the resident population and the community we serve may change over time. Through ongoing solicited input from a variety of local, state and federal sources, Golden View Health Care Center continually monitors the community's current health care needs and forecasts to prepare for future needs when possible. Furthermore, the longstanding partnerships Golden View Health Care Center has built with community based organizations and other local charitable trusts serves as another source for information important to the health and well being of our residents and the community at large. Specifically, the exchange of information related to observed shifts in trending data related to health care and professional support service needs, allows us to be responsive and offers the opportunity to re-evaluate the services we currently provide and determine if these needs can be met by Golden View Health Care Center of in partnership with another organization offering complementary services. Lastly, Golden View Health Care Center is governed by a Board of Directors composed of local community members, health care and financial professionals, guiding the organization in accordance to its mission and its fiduciary responsibility as a community based not-for-profit organization.

Section 7: CHARITY CARE COMPLIANCE

Please characterize the charity care policies and procedures of your organization according to the following:	YES	NO	Not Applicable
The valuation of charity does not include any bad debt, receivables or revenue			\boxtimes
Written charity care policy available to the public			\boxtimes
Any individual can apply for charity care			
Any applicant will receive a prompt decision on eligibility and amount of charity care offered			
Notices of policy in lobbies			\boxtimes
Notice of policy in waiting rooms			\boxtimes
Notice of policy in other public areas			\boxtimes
Notice given to recipients who are served in their home			

List of Potential Community Needs for Use on Section 3

- 100 Access to Care; General
- 101 Access to Care; Financial Barriers
- 102 Access to Care; Geographic Barriers
- 103 Access to Care; Language/Cultural Barriers to Care
- 120 Availability of Primary Care
- 121 Availability of Dental/Oral Health Care
- 122 Availability of Behavioral Health Care
- 123 Availability of Other Medical Specialties
- 124 Availability of Home Health Care
- 125 Availability of Long Term Care or Assisted Living
- 126 Availability of Physical/Occupational Therapy
- 127 Availability of Other Health Professionals/Services
- 128 Availability of Prescription Medications
- 200 Maternal & Child Health; General
- 201 Perinatal Care Access
- 202 Infant Mortality
- 203 Teen Pregnancy
- 204 Access/Availability of Family Planning Services
- 206 Infant & Child Nutrition
- 220 School Health Services
- 300 Chronic Disease Prevention and Care; General
- 301 Breast Cancer
- 302 Cervical Cancer
- 303 Colorectal Cancer
- 304 Lung Cancer
- 305 Prostate Cancer
- 319 Other Cancer
- 320 Hypertension/HBP
- 321 Coronary Heart Disease
- 322 Cerebrovascular Disease/Stroke
- 330 Diabetes
- 340 Asthma
- 341 Chronic Obstructive Pulmonary Disease
- 350 Access/Availability of Chronic Disease Screening Services
- 360 Infectious Disease Prevention and Care; General
- 361 Immunization Rates
- 362 STDs/HIV
- 363 Influenza/Pneumonia
- 364 Food borne disease
- 365 Vector borne disease

- 370 Mental Health/Psychiatric Disorders Prevention and Care; General
- 371 Suicide Prevention
- 372 Child and adolescent mental health
- 372 Alzheimer's/Dementia
- 373 Depression
- 374 Serious Mental Illness
- 400 Substance Use; Lifestyle Issues
- 401 Youth Alcohol Use
- 402 Adult Alcohol Use
- 403 Youth Drug Use
- 404 Adult Drug Use
- 405 Youth Tobacco Use
- 406 Adult Tobacco Use
- 407 Access/Availability of Alcohol/Drug Treatment
- 420 Obesity
- 421 Physical Activity
- 422 Nutrition Education
- 430 Family/Parent Support Services
- 500 Socioeconomic Issues; General
- 501 Aging Population
- 502 Immigrants/Refugees
- 503 Poverty
- 504 Unemployment
- 505 Homelessness
- 506 Economic Development
- 507 Educational Attainment
- 508 High School Completion
- 509 Housing Adequacy
- 520 Community Safety & Injury; General
- 521 Availability of Emergency Medical Services
- 522 Local Emergency Readiness & Response
- 523 Motor Vehicle-related Injury/Mortality
- 524 Driving Under Influence
- 525 Vandalism/Crime
- 526 Domestic Abuse
- 527 Child Abuse/Neglect
- 528 Lead Poisoning
- 529 Work-related injury
- 530 Fall Injuries
- 531 Brain Injury
- 532 Other Unintentional Injury

- 533 Air Quality
- 534 Water Quality
- 600 Community Supports; General
- 601 Transportation Services
- 602 Information & Referral Services
- 603 Senior Services
- 604 Prescription Assistance
- 605 Medical Interpretation
- 606 Services for Physical & Developmental Disabilities
- 607 Housing Assistance
- 608 Fuel Assistance
- 609 Food Assistance
- 610 Child Care Assistance
- 611 Respite Care

999 - Other Community Need